

~~CONFIDENTIAL~~

16 April 1959

MEMORANDUM FOR: CIA Librarian *max*

SUBJECT: Deficiencies in the Administrative and Managerial
Areas of IRC/ICD, State

1. Ever since the transfer of duties, functions, files and certain personnel of the former Foreign Publications Branch of IAD (now ICD), State to the CIA Library (i.e., Acquisitions Branch or ICD/FP) in October, 1953, there have remained unsolved certain problems in the administration and management of the foreign publications program as it pertains to operational matters between ICD and ICD/FP. These problem areas have been made a matter of record by several individuals conversant with the general aspects of our operations, the most recent case being the observations and recommendations of the Library Consultants and resultant Task Team No. 7 in 1957 and 1958.

2. In view of the long, unaltered history of these problem areas, and with regard to the reams of paper that have been consumed by CIA in identifying them and suggesting improvements, it would appear appropriate to comment on some of the conditions which prevail today, between ourselves and ICD, particularly since they call for urgent, corrective action. These may be identified as the following:

a. Lack of Policy Guidance

In the course of nearly six years close affiliation with the R area of State, this Branch has yet to become aware of any orderly structure of ICD concerned with the mission and function of the publications procurement program. Said another way, the several points or hands through which ICD/FP operational advice to the field collectors must be reviewed, questioned, philosophized over and held up, often for inordinate periods of time, by one or more individuals in ICD whose knowledge of or ability in the PO program is minimal, cause ICD/FP much unnecessary work and militate against providing the field with the support and

data required

~~CONFIDENTIAL~~

~~CONFIDENTIAL~~

data required and with a minimum of delay. It is noteworthy in this regard to point out that over the past several years, ICD has shuffled this unnecessary confusion among a series of liaison-type individuals from the Office of Chief, ICD to ICD/Requirements Staff to ICD/CIA Liaison Branch. The end result of such unnecessary activity is not guidance received by us, but futile duplication of effort. I must add that the fiscal nightmare we have experienced this fiscal year is due to the lack of any policy within or guidance from ICD on a subject which rightfully should have been known to the Chief, ICD and prevented by him from being approved. There is abundant evidence to show that confusion in ICD concerning the present fiscal procedures in both the publications and graphics procurement programs is as prevalent today as ever. It has been impossible for a Branch of ICD, ourselves, to lead the Division out of this ignorance, particularly if it did not wish to be led.

b. Lack of Special Assistant

This subject may appear to have been overworked and given undue importance by some, and yet it appears to me to be the crux of the several other problems. The creation and staffing of the SA/P position by a competent individual, not by a Foreign Service career generalist, which would mean a new appointment every two or three years but by a specialist [REDACTED] would go extremely far towards resolving many difficult areas, including the lack of policy guidance noted above.

c. Role of Chief, ICD/FP

As you can well imagine, my personal experiences in this capacity have taught me a great deal, both about people and the things that motivate them, be the latter publication needs, research papers, or empire building. It has also taught me that no man can serve two masters...in the words of St. Matthew, "For either he will hate the one and love the other; or he will sustain the one and despise the other...". I trust you know that I have neither hatred nor loathing in me toward anyone, but I do not know how much longer I can love and sustain both yourself and Leo, given the conditions of today.


3. The above

~~CONFIDENTIAL~~

~~CONFIDENTIAL~~

3. The above comments summarize only certain problems we have with ICD, and do not cover all our problems even though I consider the above the key problems. Should you desire amplification or other data, please let me know.

25X1A9a


Chief, Acquisitions Branch

~~CONFIDENTIAL~~